

EXHIBIT

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Letter to St. Agnes Hospital

Introduction:

My name is Geraldine Lauture. I am an American citizen with a Caribbean background, am married and the mother of two children, and practice the faith of Christianity. I am a Medical Lab Technician and have been working in that position during the weekday on evenings in the Microbiology lab at St. Agnes Hospital from August 2004 to December 2005. During this time my work was fine. In fact my competency evaluations, including the most recent one a few months ago, was a favorable rating. I had no problems with my coworkers, and can say that I did not experience anything like outright prejudice. The same is the case for other jobs I have held. On December 5, 2005 I changed to working from evening to dayshift. The main difference with moving to dayshift was that there was now more interaction since the dayshift has more coworkers in the lab while on the evening shift I was the only one on that shift. I was prepared for this because at another job in this same field I work during dayshift and come in contact with coworkers. Moreover, I am an easygoing person and can get along with just about anybody.

Reason for Letter:

Since my move to dayshift my work situation has become next to unbearable. Since then I have been accused of not getting along with coworkers, been written up, been accused of endangering coworkers due to poor lab techniques, been accused of endangering other hospital staff and patients due to poor lab performance, been suspended and told I would be investigated, and been asked to come in to be retrained. In this letter I will answer these serious career ending charges and show that the situation in which I work is filled with bias, unprofessionalism, favoritism, disrespect for others, and outright prejudice. I have been unlucky to have experienced these things and have been harmed and humiliated by these behaviors. These actions are not in line with the Christian principles of St. Agnes Hospital or my Christian principles. That is why I am writing to St. Agnes on this matter, as I answer the charges made against me.

Answer to Charges:

The first charge against me is a verbal warning in a written document dated January 4, 2005. This date is actually incorrect. It should say 2006 since that is when I got the document after a meeting with my supervisors Peg Kinch and Jane Weiger. The document is titled St. Agnes Healthcare Counseling Report. It

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has to do with my interaction with the daytime Lab Assistant Stephanie Rutter. As an Assistant she does not perform any testing but her duties include helping out the Planter who is the person processing the incoming work and reporting out the results. That would be me. Prior to my coming to days Stephanie processed the blood samples for Immunology testing in our lab. This makes sense since this job can take up the Planter's time and backlog them in processing and reporting specimens. With my coming to dayshift she said she was no longer going to do this. I told my supervisors about this and they told me it was my job and she was not required to do it. This was strange since she had done it up until that time. I also requested that when she receive OR (Operating Room) specimens with more than one test that she write the requisition numbers on the specimen so it would not cause confusion when I got to process the specimen under the hood. She refused to do this and the supervisors did nothing to see that she do this to cut down on mistakes in processing. Instead she kept going to them to complain about me. It must have worked because the supervisors, in this document make reference to my '*inability to work together with Stephanie*.' The report goes on to describe me as '*interrupting work, creating an unpleasant work environment, and dragging other coworkers into their Mexican standoff*.' The hospital needs to interview people I work with to find out if I 'interrupt' and 'cause an unpleasant environment at work.' During that interview they should also ask about my coworker Stephanie. One last note on this matter. Yesterday 2/14/05 at 11:30 am, I was in the lab reading training procedures. Another Caucasian coworker was on duty as the Planter. There was Stephanie processing the bloods for Immunology testing for this person. Is this not discrimination? And what about the supervision? She gets to decide that for one coworker she will do this task and for another she will not, and her supervisors cannot tell her one way or the other what she should be doing. Concerning this document dated 1-4-05. I was asked to sign it by my supervisors when they handed it to me following a meeting. I did not want to sign it at first. But supervisor Jane Weiger said the document would be internal and not go outside the lab, since this was only a formal verbal warning on the matter. I was shocked when Human Resources handed me the document a few days ago. This is a breach of confidentiality, and it is not a small matter.

The next document is a St. Agnes Hospital Counseling Report dated 2/2/06. The document begins by saying, '*During the past 2 months that Geraldine has been working on the dayshift there has been incidences that show she does not have a basic understanding of certain microbiology lab procedures*.' This is incredible. For close to a year and a half have I worked in the Microbiology lab. I worked on my own during the evenings with full responsibility for processing specimens and reporting results. Just before moving to days the supervisors thought I was quite capable enough to train the two new evening shift employees for the evening duties. Then 2 months later they think I lack basic skills. What is going on here?

Is there a problem with supervision? The document goes on to state things I am supposed to have done wrong or badly, such as processing TB and PCP specimens. It must be pointed out that these two procedures are daytime tests, and I was only just being trained hastily in how to do them. The document also states in paragraph 7 that '*Jan 23, 06 Autopsy specimens M2204, M2209, M2207, M2210 from 1/23/06 not processed. Specimens left under hood.*' For anyone who wants to check, on that day the tube system was down for most of the day, creating a backlog. On that day I was being trained in TB and PCP procedures by supervisor Jane Weiger, and so was away from processing under the hood. Also, if my memory is correct on that same day the supervisors held a lab staff meeting, during which time no processing was done as attention was focused on the meeting. Now we can see how the huge backlog was created and some specimens were not able to be processed by me that day. Should the supervisors not have assigned someone else to plant specimens if they were training me elsewhere? Should they not have given me additional coworker help to deal with the backlog from the broken down tube system?

The third document is a St. Agnes Hospital Counseling Report dated 2/7/06 with the box marked 'Suspension' checked. The 2nd paragraph of this document begins with:

'Since then it has come to our attention by several associates that her job performance has deteriorated to the extent that it has impacted fellow associates safety, patient care and has put St. Agnes and patients at risk.

The issues involved show a fundamental lack of knowledge and the resolutions to correcting these issues cannot be imparted by additional training.' This is confusing and shocking! Two months earlier I am qualified to train newly hired employees, then suddenly I am a danger to lab personnel and St. Agnes. What a joke. Does that not say something about supervisory duties? More confusion. It says that these problems cannot be fixed by additional training. Is the brain in this dark skin that useless that additional training cannot help. I did not know I was that hopelessly dumb and was never told so before. But now why am I being trained as I write this letter? This is a serious attack on me and my ability and it is insulting. I cannot let this go by and St. Agnes has to address it.

Firstly, who are these 'several associates' whose safety I am threatening with my poor work practices. If an investigation has been done I should know who these people are. Also, I should be able to give names of people at work who attest to my work. I was not able to do so in this whole matter.

Now for a serious matter addressed in this document. Paragraphs 6,7, and 8 goes into detail of how I mishandled the Quality Control on a 56 degree water bath. The document says '*During this time, the reason we needed to use the water bath was to run a confirmation test (Meningitis Screen) on a patient that had a potentially pathogenic organism (Neisseria meningitidis) in their blood culture.*' There is even a chart of the bath recorded temperatures that I

supposedly mishandled. However this chart is more of a problem for those accusing me than it is for me. On the chart I show what I did to correct the temperatures. On one of the entries, not made by me, the temperature is almost 3 degrees less than it should be. There is not even an entry for corrective action as in my entries. Has that person been written up, warned, or subjected to investigation? Also on this form 1-28-06 and 1-29-06 show no entries at all. Our lab is open every day. How is there no entries for two weekend days. Has this person been warned with documentation showing that? If not then my case is nothing short of discrimination. A serious matter.

Now about the water bath being used for Meningitis Screen. They go on to say that the use of the 56 degree bath was for a Meningitis screen that turned up positive for Neisseria on an autopsy. Because of my incompetence with the water bath they say the autopsy was done and a lot of pathology staff were exposed. Let me quote:

'Infection control determined that up to 140 associates had to be offered prophylactic treatment. Again, because of the delay in notification, (Change of Shift on a Friday afternoon) Associates were asked not to leave St. Agnes until Infection Control told them to report to EHS.'

'This seemingly minor issue of QC documentation and incorrect temperature adjustment turned into a major safety issue.'

Listen to me good. I know how important the 56 degree water bath is for testing in our lab. But the statement by the supervisors that I posed a danger to St. Agnes by mishandling the bath QC and contributing to potential exposure of employees by not having it available for timely testing of Neisseria meningitidis is **totally false. They made absolutely false statements.** The 56 degree bath is not needed for Meningitis Screen testing. In the Microbiology Lab at St. Agnes Hospital is a folder titled Dept. of Pathology Immunology Technical Procedure Manual. It is the reference for all Immunology testing we do in that lab. Page 17 begins with the title Meningitis Screen. The page describes the test.

Under the heading Specimen Preparation it states:

1. CSF - heat 500 uL CSF in a boiling water bath for 3 minutes. Allow to cool.
2. Serum - dilute at least 0.6ml serum 1:1 with Directigen buffer, mix, heat in a boiling water bath for 5 minutes. Cool. Vortex clot formed, then centrifuge for 15 minutes. Test supernatant.

This document, called an SOP, which stands for Standard Operating Procedure was prepared by Jean Bateman 3-85, accepted and signed by Ann Reed M.D. on 10-5-04 and reviewed by Sally Ondiek on 10-5-05. It is what we have to follow to do our testing. It could not be more clearer. For Meningitis Screen testing for the contagious Neisseria meningitidis the 56 degree water bath is not used. The

sample has to be boiled at 100 degrees to kill any pathogens.

Conclusion:

The question is why did the supervisors of Microbiology go out of their way to make such distortions and false statements to those investigating my performance. This is something St. Agnes will have to address. I enjoy working for the hospital. They are based on the Christian principles that I live by, such as truthfulness, respect for myself, and respect for others. There have been times when I have walked in the lab and said a warm good morning and certain coworkers, including the supervisors, have not returned the greeting. This is surely not the Christian principle that the hospital is based on. I would like to continue working for St. Agnes but my career has been seriously damaged by these wild, distorted, and even false accusations. I have been discriminated against and my human rights have been seriously violated. I have not sought legal advice on this matter as of right now. I would prefer St. Agnes met with me to straighten this out to get my good name back and address the suffering and embarrassment I have been put under and attack on my character. If St. Agnes decides not to deal with me on this then I will be forced to take legal action as a last choice. And that would be a shame. Thank you.

Yours truly



Geraldine Lauture

cc: Peg Kinch & Jane Weiger
Director Human Resources
Lab Director
Hospital Director
Sisters of St. Agnes